

FILED
IN CLERKS OFFICE
UNITED STATES DISTRICT COURT
DISTRICT OF MASSACHUSETTS
DEC 4 11:04

U.S. DISTRICT COURT
DISTRICT OF MASS.

Radames Melendes
Modesto Salana AKA

Attachment 1
Civil Action

Vs

03-12627 JLT

Essex County Correctional Facility
D. Diaz
Frank J. Cousins, Jr., Sheriff
et.al.
Referred to MJ JG Dein

Complaint
Parties

1. The plaintiff, Radames Melendes, is a resident of Lynn, Essex County, Massachusetts and a citizen of the United States.
2. The defendant, D. Diaz is a resident of _____ and a citizen of the United States
3. The defendant, Frank J. Cousins, Jr. is a resident of _____ and a citizen of the United States.
4. Essex County Correctional Facility is located in Middleton, Essex County, Massachusetts.

5. This court has jurisdiction over this matter pursuant to 28 U.S.C. 31332.

6. On August 8, 2003 I was transferred to the infirmary in Essex County Correctional Facility from block 240c. Correctional Officer D. Diaz took all my property and packed it for storage. My possessions included but were not limited to original legal documents, family photos and artifacts that are not replacable. He told me that he would take my property to the control room and have it stored until such time that I would be released from the infirmary and returned to block 240c. My property or personal have never been returned.

7. Officers of the Department of Corrections, employees of the Commonwealth of Massachusetts, violated the plaintiff's constitutional right under the 4th Admenendment of the United States Constitution which states in part that, "the right of the people to be secure in their ... papers and effects against unreasonable searches and seizures shall not be violated ..."; and under the 5th Admenendment of the United States Constitution which states in part that "no person shall be ... deprived of ... property without due process of law."

8. Under the Civil Rights Act of 1871, every person acting under color of law who causes a

deprivation of federal rights. is liable.

9. Essex County Correctional Facility, a government entity is liable under the Civil Rights Act of 1871 for causing the deprivation of plaintiff's federal rights by failure to train, control, and/or supervise employees.

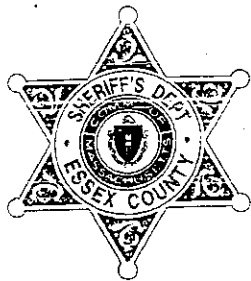
10. The relief I am seeking from the defendants is the return of any and all personal property Essex County Correctional Facility may still have in their possession or control; and whatever monetary reward the court deems just and appropriate for the mental and physical stress I been forced to undergo.

12. Wherefore, the plaintiff demands judgement against the defendants for damages and other relief as this court deems just.

13. The plaintiff demands a trial by jury.

Ramades Melendes #36868
20 Manning Ave
P.O. Box 807
Middleton, MA. 01949

Ramades Melendes
12 - 18 - 03



Essex County Correctional Facility

or

Sheriff's Headquarters

INMATE FORMAL GRIEVANCE FORM

(ALL INFORMATION MUST BE PRINTED AND FILLED OUT IN FULL)

REGULAR COMPLAINT ☐EMERGENCY COMPLAINT ☒INMATE NAME: RADAMES MELENDEZ I.D. #: 36868HOUSING UNIT: 240C CELL #: 713 DATE: 9/22/03DATE OF OCCURRENCE: 8-8-03

COMPLAINT: ON August 8 of 2003 they send me to the
inmate and officer D. Diaz took my property and
back it. He told me that he will take it to the
control room. Ever since I haven't seen my property.
In my property I had: All my legal papers, personal letters
from my family, Hot pot, radio and \$40 dollars worth
of food. If you can please take this matter into
consideration. Thank you.

Inmate Suggested Remedy:

Everything I have in my property is very important to me.
I need all my property BACK (ASAP)

NOTICE:

ALL INFORMATION MUST BE COMPLETE, LEGIBLE AND SUBMITTED WITHIN 10 DAYS OF DATE OF COMPLAINT. INMATE GRIEVANCE REMEDY FORM MUST ACCOMPANY THIS FORM. NO GRIEVANCE WILL BE ACCEPTED BY OR ON BEHALF OF A GROUP.

Inmate Signature and Date

Staff Person Receiving Complaint (Print)

Staff Person Receiving Complaint (Signature)

FOR GRIEVANCE OFFICER ONLY

Date Received: _____

Grievance Number: _____

Date: 9/22/03



Essex County Correctional Facility

or

Sheriff's Headquarters

INMATE FORMAL GRIEVANCE FORM

(ALL INFORMATION MUST BE PRINTED AND FILLED OUT IN FULL)

REGULAR COMPLAINT ☐EMERGENCY COMPLAINT ☒

INMATE NAME: RADAMES MELENDEZ I.D. #: 36868
 HOUSING UNIT: 240C CELL #: 713 DATE: 9/24/03
 DATE OF OCCURRENCE: 9-8-03

COMPLAINT: I thank you for what you're trying to do for me. But that's materialistic things that can't repay for my original property. What are you trying to offer me I can't accept, until I talk to my lawyer. My most personal items are missing and for the reward I need \$50,000 (Fifty thousand dollars)

Inmate Suggested Remedy:

I need my original property. If not you can reward me \$50,000 dollars

NOTICE:

ALL INFORMATION MUST BE COMPLETE, LEGIBLE AND SUBMITTED WITHIN 10 DAYS OF DATE OF COMPLAINT. INMATE GRIEVANCE REMEDY FORM MUST ACCOMPANY THIS FORM. NO GRIEVANCE WILL BE ACCEPTED BY OR ON BEHALF OF A GROUP.

Radames Melendez 9/24/03
 Inmate Signature and Date

[Signature]
 Staff Person Receiving Complaint (Print)

[Signature]
 Staff Person Receiving Complaint (Signature)

FOR GRIEVANCE OFFICER ONLY

Date Received: _____

Grievance Number: _____

9-24-03
 Date:



Essex County Correctional Facility

&

Sheriff's Headquarters

GRIEVANCE APPEAL FORM

(ALL INFORMATION MUST BE PRINTED AND FILLED OUT IN FULL)

INMATE NAME: Rodame's Melendez I.D. # 36868
 HOUSING UNIT: 240C CELL# 713 GRIEVANCE # 6964

REASON FOR APPEAL:

I hope this matter can be resolve as soon as possible. all my personall that this correctional facility have lost, have me in such stage of mental trauma that gives me the lack of sleep. I want you to understand that my property is very personal and treasurous to me. by now anyone can have them and doing whatever they want with them. thinking about the fact that someone may have my personall make me physically and mentally stress. I have talk to several of the correctional staff, and I been advised that there is nothing they can do. for that reason I believe I need to be awarded \$50,000 dollars for all the damages that this correctional staff have cause. Thank you

NOTICE:

ALL INFORMATION MUST BE COMPLETE, LEGIBLE AND MUST BE SUBMITTED WITHIN TEN DAYS OF RECEIPT OF GRIEVANCE DECISION. GRIEVANCE APPEAL FORMS MUST BE FORWARDED TO THE GRIEVANCE OFFICE TO BE ISSUED A GRIEVANCE NUMBER.

INMATES SIGNATURE: Rodame's Melendez DATE: 9/25/03 TIME: 9:50
 OFFICER RECEIVING APPEAL: [Signature] DATE: 9/25/03 TIME: 9:50